

**City of Brookhaven**  
 200 Ashford Center North, Suite 150  
 Dunwoody, GA 30338  
 404-637-0500 Fax: 404-637-0501  
 www.brookhavenga.gov

## Administrative Permit Application

<b>Subject Property / Event</b>	Location of the Subject Property and/or Event (physical street address or street intersection):
	Permit Description:
<b>Applicant</b>	Date/Duration of Event: _____ To: _____
	The Community Development/Public Works Director may require a Site Plan to scale showing the subject property upon which the proposed use is to be located, the proposed location of use on the distance of the use from the subject's property's boundaries, the subject's property's setbacks and buffers and all existing structures or buildings on the subject property. <b>Attached?</b> <input type="checkbox"/> <b>Yes</b>
<b>Property Owner</b>	Name:
	Address
	Phone:
	Email:
	Owner's Name:
<b>Contractor/Operator or Information</b>	Owner's Address:
	Phone:
	Email:
	Property Owner's Signature Indicating Permission for Activity: (or attach separate sheet or letter)
	Company:
<b>Contractor/Operator or Information</b>	Name:
	Address:
	Phone:
	Email:

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**Applicant's Certification,  
Affidavit and Signature**

Name of Proposed Use: \_\_\_\_\_

Description of Proposed Use: \_\_\_\_\_

*To the best of my knowledge, application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Brookhaven Code of Ordinances. I understand that failure to supply all required information will result in the rejection of this application or revocation of a permit. I hereby indemnify and hold the City harmless from claims, demand or cause of action which may arise from activities associated with the approval. I hereby certify that the site description herein will be constructed and/or used in accordance with all applicable zoning ordinances and laws governing the City of Brookhaven, Georgia. Further, Applicant states, understands that, should a complaint be filed against the Applicant for violation of any regulation associated with the Application for Administrative Permit, the permit issued for the subject event/use will immediately become void and will not reissue for the same location.*

Applicants Signature \_\_\_\_\_

Sworn and Attested before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary  
Signature: \_\_\_\_\_

Staff Use Only	
Zoning:	Permit Number:
Processed By:	Date:
Approved/Denied By:	Approval/Denial Date:
Permit Fees:	Expiration Date: